

CLAIMS ONLY						Application Number 101073063	Filing Date
						Applicant(s)	
						* May be used for additional claims or amendments	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		
	Indep	Depend	Indep	Depend	Indep	Depend	Indep
1							51
2							52
3							53
4		1					54
5							55
6			2				56
7				3			57
8					4		58
9						59	
10						60	
11						61	
12						62	
13						63	
14						64	
15						65	
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41						91	
42						92	
43						93	
44						94	
45						95	
46						96	
47						97	
48						98	
49						99	
50						100	
Total Indep	3					Total Indep	
Total Depend	21					Total Depend	
Total Claims	24					Total Claims	